# Linking HMOs and Their Communities: From a Consumer Perspective



OPA Conference: May 2007

# The Health Consumer Alliance

nmunity education to empower individuals and community organizations to solve immediate problems address those that may arise in the future; and a analysis to identify problems and conduct systemic advocacy to propose solutions to the underlying ses of consumers' health care problems.  I Health Consumer Centers cover 13 counties across California including Alameda, El Dorado, Fresno Kern ,Los Angeles, Orange, Placer, Sacramento, San Diego, San Francisco, San Mateo, and Yolo munity Health Advocacy Project, a project of Bay Area Legal Aid sumer Center for Health Education & Advocacy, a program of the Legal Aid Society of San Diego
ses of consumers' health care problems.  I Health Consumer Centers cover 13 counties across California including Alameda, El Dorado, Fresno Kern ,Los Angeles, Orange, Placer, Sacramento, San Diego, San Francisco, San Mateo, and Yolo
Kern ,Los Angeles, Orange, Placer, Sacramento, San Diego, San Francisco, San Mateo, and Yolo nmunity Health Advocacy Project, a project of Bay Area Legal Aid
, , , , , , , , , , , , , , , , , , , ,
, , , , , , , , , , , , , , , , , , , ,
sno Health Consumer Center, a project of Central California Legal Services
Ith Consumer Center of Imperial Valley, a project of California Rural Legal Assistance, Inc.
Ith Consumer Center of Los Angeles, a project of Neighborhood Legal Services of Los Angeles County
Ith Consumer Center of San Mateo County, a project of San Mateo County
Ith Rights Hotline, a project of the Legal Services of Northern California
n Health Consumer Center, a project of Greater Bakersfield Legal Assistance, Inc.  nge County Health Consumer Action Center, a project of the Legal Aid Society of Orange County
l

## Who we serve

- Each year, local Health Consumer Centers serve over 14,000 individual consumers, almost 1,200 a month, with a broad array of problems from terminations of coverage to billing problems and language access barriers to care.
- **HCA services were delivered to people in poverty**. Over three fourths of clients (77%) were poor or near poor, with a family income below 150% of the federal poverty level. Half (50.4%) were living below the poverty level.
- **HCA served a broad and diverse population.** Two-thirds of HCA clients (65.2%) were minorities including Latino (49.1%), Asian Pacific Islander (9.6%), and African-American (6.5%).
- **HCA provided assistance in 16 languages.** Clients were helped in multiple languages, including Spanish, Hmong, Cantonese, Mandarin, Cambodian, Russian, Vietnamese, Armenian, Korean, Tagalog, Arabic, Hebrew, Farsi and Sign Language.
- HCA served consumers of all ages. More than one in four (26.5%) were children.
- **HCA served clients with a variety of types of health coverage.** Four in 10 (40%) had no insurance. Nearly half (47.3%) were covered by Medi-Cal or other public programs.
- Access to health coverage was a major problem for HCA clients. Nearly 60 percent (59.4%) had difficulty obtaining or maintaining eligibility for health coverage.
- Obtaining medical services and quality care was a problem for many with health insurance. Over one-fourth (27.3%) had problems accessing health services or getting quality care despite having health insurance.



- Each individual consumer is entered into our comprehensive database which allows us to collect information on a persons income, health coverage, and what problem they are currently experiencing as well as other pertinent information. Our database is divided into two main sections, eligibility problems and service problems.
- For the period of January 1, 2006 through December 31, 2006, in the thirteen HCA counties, managed care consumers reported 1086 eligibility problems. These included:
  - □ Eligibility Terminated or Proposed for termination (351 problems reported)
  - Affordability problems (256)
  - □ Retention (MSR/AER) (101)
  - Other problems included Language, Cultural and Racial Barrier, procedural problems with application, and application delayed.

### **HCA Database: Service Problems**

•	There were 2290 service problems for consumers in managed care between January 1, 2006 and December 31, 2007. The top problems reported are as follows:		
		Client unaware of how to use available services (505)	
		Billing/charges to or payments from consumers (392)	
		Denied Services (305)	
		Care Unaffordable including co-payments and deductibles (149)	
		Other problems included quality or appropriateness of care, enrollment and disenrollment problems (with a plan or provider), customer service, care unavailable or inaccessible, and language, cultural or racial barriers.	
•	<ul><li>The top services needed by consumers included the following:</li><li>Prescription Drugs</li></ul>		
		Emergency/ Urgent Care	
		Office Visits	
		Specialty Care	



# **Working with your Community**

- 1. Bring everyone to the table
- 2. Formalize process for community input
- 3. Share ideas and problems
- Have a good liaison
- 5. Accept help



# 1. Bring Everyone to the Table

- Don't be afraid to bring everyone to the table
  - □ Be sure to include a diverse group of stakeholders
  - Encourage open communication between the plans, providers and community organizations.
  - Recognize shared interests
- The more the community is involved, the greater the satisfaction with the HMO
  - □ Between all of the different HCA Partners, satisfaction with the health plans in their counties was the highest when they had open and regular communication.
  - Open and regular communication with the local health plans decreased formal grievances and/or appeals.



# 2. Formalize the Process for Community Input

- Input can and should take a variety of forms:
  - □ Involvement by the Community on Board of Directors and Advisory Committees.
  - Patient Advocates: Consider making appropriate community organizations official patient advocates or ombudsman.
  - □ Community Meetings

### 3. Share Ideas and Problems

- Community organizations have daily contact with members and the ability to share information on problems and trends they are seeing with particular plans.
  - Allows the health plans to identify local needs and problems
- Sharing information is most effective when the process goes both directions.
  - Allows problems to be identified and addressed before they become bigger issues.



### 4. Have a Good Liaison

- Especially important for low-income members and those with limited English skills
- Allows for informal grievances to be raised and resolved
- Increases chances of good access to member services, a quick response and open communication



### 5. Ask for Help

Community Organizations are a wealth of information for health plans, providers and members and can provide assistance in a number of ways including:

- Training for health plan staff and providers
- Providing an essential role in educating members
- Providing assistance in developing materials
- Providing assistance in coordinating services

- FRESNO COUNTY
- Fresno Health Consumer Center
- Central California Legal Services, Inc.
- 1999 Tuolumne St., Suite 700
- Fresno, CA 93721-2011
- **800.300.1277**
- IMPERIAL COUNTY
- Health Consumer Center of Imperial Valley
- California Rural Legal Assistance, Inc.
- 449 Broadway Avenue
- El Centro, CA 92243-2415
- **760.353.0222**
- KERN COUNTY
- Kern Health Consumer Center
- Greater Bakersfield Legal Assistance, Inc.
- 615 California Avenue
- Bakersfield, CA 93304-1611
- **800.906.3982**
- LOS ANGELES COUNTY
- Health Consumer Center of Los Angeles
- Neighborhood Legal Services of Los Angeles County
- 13327 Van Nuys Blvd.
- Pacoima, CA 91331-3099
- 800.896.3203
- ORANGE COUNTY
- Orange County Health Consumer Action Center
- Legal Aid Society of Orange County
- 902 North Main St.
- Santa Ana, CA 92701-3507
- 800.834.5001 and 714.571.5200

- SACRAMENTO, EL DORADO, PLACER & YOLO COUNTIES
- Health Rights Hotline
- Legal Services of Northern California
- 519 12th Street
- Sacramento, CA 95814-1418
- 888.354.4474 and 916.551.2100
- SAN DIEGO COUNTY
- Consumer Center for Health Education and Advocacy
- Legal Aid Society of San Diego, Inc.
- 1475 Sixth Avenue, 4th Floor
- San Diego, CA 92101-3245
- 877.SDHEALTH (877.734.3258) (toll free)
- SAN FRANCISCO and ALAMEDA COUNTIES
- Community Health Advocacy Project
- Bay Area Legal Aid
- 50 Fell St., 1st Floor
- San Francisco, CA 94102-5298
- 415.354.6360 for San Francisco and 510.250.5270 for Alameda
- SAN MATEO COUNTY
- Health Consumer Center of San Mateo County
- Legal Aid Society of San Mateo County
- 521 East Fifth Ave.
- San Mateo, CA 94402-1302
- 800.381.8898 or 650.558.0915
- STATEWIDE SUPPORT
- National Health Law Program
- 2639 South La Cienega Blvd.
- Los Angeles, CA 90034-2603
- 310-204-6010
- Western Center on Law and Poverty
- 3701 Wilshire Blvd., Suite 208
- Los Angeles, CA 90010-2809
- **213-487-7211**



#### Contact Information:

Kate McGarvey, J.D.
Director, Health Consumer Alliance
The National Health Law Program
2639 S. La Cienega Blvd.
Los Angeles, CA 90039
(310) 204-6010 ext. 113
(310) 204-0891 (fax)
mcgarvey@healthlaw.org
www.healthconsumer.org